



GEORGIA MEDICAID FEE-FOR-SERVICE DOXYCYCLINE PRODUCTS PA SUMMARY

Preferred	Non-Preferred
Doxycycline hyclate immediate-release generic Doxycycline monohydrate 50, 100, 150mg capsules Doxycycline monohydrate 75, 100, 150mg tablets Vibramycin oral suspension, syrup (doxycycline)	Doryx, Doryx MPC (doxycycline hyclate delayed-release) Doxycycline hyclate delayed-release generic Doxycycline monohydrate 75mg capsules generic Doxycycline monohydrate 50mg tablets generic Doxycycline oral suspension generic Doxycycline [rosacea] delayed-release generic Morgidox Kit (doxycycline hyclate with cleanser) Oracea (doxycycline [rosacea] delayed-release))

NOTE: If generic doxycycline hyclate delayed-release is approved, the PA will be issued for brand Doryx. If generic doxycycline [rosacea] delayed-release is approved, the PA will be issued for brand Oracea.

LENGTH OF AUTHORIZATION: 1 Year

PA CRITERIA:

Doryx, Doryx MPC, Doxycycline Hyclate Delayed-Release Generic and Morgidox Kit

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred product, generic doxycycline hyclate immediate-release, is not appropriate for the member.

Doxycycline Monohydrate 75mg Capsules Generic

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred product, generic doxycycline monohydrate 75mg tablets, is not appropriate for the member.

Doxycycline Monohydrate 50mg Tablets Generic

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred product, generic doxycycline monohydrate 50mg capsules, is not appropriate for the member.

Doxycycline Oral Suspension Generic

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred product, brand Vibramycin oral suspension, is not appropriate for the member.

Doxycycline [Rosacea] Delayed-Release Generic and Oracea

- ❖ Approvable for members with rosacea who have tried and failed the following medications in the past 6 months: doxycycline 20 or 50 mg (tablet or capsule) and Vibramycin suspension or syrup.
- ❖ In addition for generic doxycycline [rosacea] delayed-release, prescriber must submit a written letter of medical necessity stating the reasons brand Oracea is not appropriate for the member.



EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling **OptumRx at 1-866-525-5827**.

PREFERRED DRUG LIST:

- ❖ For online access to the Preferred Drug List (PDL), please go to <http://dch.georgia.gov/preferred-drug-lists>.

PA and APPEAL PROCESS:

- ❖ For online access to the PA process, please go to www.dch.georgia.gov/prior-authorization-process-and-criteria and click on Prior Authorization (PA) Request Process Guide.

QUANTITY LEVEL LIMITATIONS:

- ❖ For online access to the current Quantity Level Limits (QLL), please go to www.mmis.georgia.gov/portal, highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services and select that manual.